

496 Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

NAME OF FILER Ed Selich for City Council 2010		Date of This Filing 10-22-14	RECEIVED 496 INDEPENDENT EXPENDITURE REPORT Date Stamp 2014 OCT 23 AM 8:51 OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER 949-300-9465	I.D. NUMBER (if applicable) 1290041	Report No. 3		
STREET ADDRESS 627 Bayside drive		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Newport Beach	STATE Ca	ZIP CODE 92660		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Mike Toerge				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council	DISTRICT NO. 6	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10-22-14	Campaign Contribution	\$1,100.00

Reason for Amendment: _____